PRE-APPLICATION PART 2 INSTRUCTIONS

CHAPTER 4a.5: Disinfection Byproduct Treatment Facilities

These funds may be used by public water systems for treatment facilities necessary to meet disinfection byproduct (DBP) safe drinking water standards. The applicant must be in non-compliance with the U.S. Environmental Protection Agency Stage 1 DBP Rule Maximum Contaminant Levels (MCLs) or treatment technique for total organic carbon (TOC) reduction. The project must follow all appropriate guidance for pathogen control.

Maximum Grant: $2 million Minimum Grant: $50,000

The pre-application package for this grant program must not exceed 9 pages total, including Part 1, Part 2, and attachments (described below).

- **You do not need to use all 9 pages.**
- **Any pages beyond the limit will not be reviewed.**
- **Do not attach a cover sheet or cover letter.**
- **Do not attach maps or drawings unless they are included in the page limit.**
- **All forms are to be completed in at least a 10-point font, on 8 ½ x 11 paper, with ½ inch margins all around.**
- **Electronic submittals are preferred (refer to submittal requirements).**

A. Project Title

Repeat the project title from Part 1 of the pre-application.

B. Applicant Water System

Repeat the DHS public water system identification number, the DHS public water system name, and the legal name of applicant from the Part 1 of the pre-application.

C. Funding

4. Prop 50 Grant Funds Requested
   Enter the amount of Prop 50 grant funds requested for this project. Note the maximum and minimum grant amounts for each grant program.

5. Amount of Matching Funds to be Provided
   Enter the amount of matching funds to be provided by the applicant or others for this project. A 1:1 match of non-state funds is required for all grant awards, with the following exceptions: no match is required for grants to disadvantaged communities; no match is required for small water systems; matching funds for public water systems owned by state agencies may include state funds and services. Matching funds may include local sources (user fees, local taxes), federal sources (loan, grants), in-kind services, etc.

6. Anticipated Source of Matching Funds
   On the Proposed Project Budget form (Attachment E) identify the anticipated sources and amount of matching funds. Refer to the Attachments section for more information.

D. Problem Description

Briefly describe the water system problem(s) that this project is intended to address. Explain how the water system is in non-compliance with the U.S. EPA Stage 1 DBP Rule MCLs or treatment technique

for TOC reduction. Describe water system disinfectant residual levels compared with the Stage 1 Maximum Residual Disinfectant Level Goals (MRDLGs) or with Maximum Contaminant Levels (MCLs) for disinfectants. Describe the problem in sufficient detail to allow reviewers to understand and evaluate the nature of the problem. For more information on the Stage 1 Rule, refer to the EPA website (*http://www.epa.gov/safewater/mdbp/mdbp.html#st1*) or contact your DHS or county regulator.

Begin the description in the space available on the form, and continue the description in an attachment as necessary (see attachment requirements below). Do not exceed the page limit.

E. Disinfection Byproduct Concentrations

Use your water system monitoring data to determine the average concentration of each regulated DBP in micrograms per liter (µg/L). In the determination use the following information:

- For water systems serving <10,000 people, all available data should be used to determine the average concentration of individual regulated DBPs.
- For those water systems serving ≥10,000 people, the last five years of quarterly data should be used to determine the average concentration of individual regulated DBPs.

Report the DBP concentrations in Column D of Table 1 (attached to the form). Enter results for each DBP in Column C, including total trihalomethanes (TTHM) and haloacetic acids (HAA5), if the information is available.

Describe any special circumstances, procedures, or results in an attachment (see attachment requirements below). Do not exceed the page limit.

F. Calculated Theoretical Cancer Risk

Calculate the theoretical cancer risk, by dividing the DBP concentrations in Column D in Table 1 by the cancer risk coefficients in Column C, and enter the results into Column E of Table 1. This is the calculated theoretical cancer risk per million people.

> Note that for TTHM, HAA5, Chloroform, Monochloroacetic Acid, Monobromoacetic Acid, Trichloroacetic Acid, Dibromoacetic Acid, and Chlorite, there is no numeric value in Column C. Therefore, Column E will have results only for Bromodichloromethane, Bromoform, Dibromochloromethane, Dichloroacetic Acid, and Bromate.

Finally, sum the theoretical cancer risk in Column E for all DBPs and report the total at the bottom of Column F.

Describe any special circumstances, procedures, or results in an attachment (see attachment requirements below). Do not exceed the page limit.

G. Project Description

Provide a description of the project and how it addresses the problem described in Question D. Describe the types of facilities to be included in the project and the approximate number, size, or capacity of proposed facilities, if known. Describe the current status of the project. Specify whether the project will address compliance with DBP MCLs or treatment technique, and describe how this will be accomplished.

Begin the description in the space available on the form, and continue the description as necessary in an attachment (see attachment requirements below). Do not exceed the page limit.

Ineligible projects or components: operation and maintenance (except for treatment plant startup costs), new sources.

H. Attachments

You are limited to **4** pages total for attachments for this pre-application, with a maximum of 9 pages as stated for the entire pre-application. Attach the following information as necessary.

Proposed Project Budget (REQUIRED)
Using the format of Attachment E of this pre-application package, prepare a proposed project budget. As part of the budget, show the anticipated source and amount of matching funds for the project, as shown in Attachment E. Use one page or less for the budget and sources of matching funds.

Table 1 for reporting DBP concentrations and calculating theoretical cancer risk. (REQUIRED)

Additional detail for problem description
Continue the problem description as necessary for Question D in an attachment.

Description of any special circumstances, procedures, or results
Provide additional detail as necessary for Questions E or F or Table 1 in an attachment.

Additional detail for project description
Continue the project description as necessary for Question G in an attachment.